

THE TREATMENT OF PSORIASIS WITH APPLICATIONS OF HYDROXYLAMINUM MURIATE.

FABRY reports (*Archiv für Dermatologie und Syphilis*, H. 2, 1889) his experience with the hydroxylaminum in the treatment of this disease. The twenty-four cases on which the observations were made occurred in the service of Dr. Doutrelepon, of Bonn. The external use of the drug is here referred to, as its internal use has been found to have a paralyzing effect upon the nerve centres. Even its local application needs medical supervision. The remedy was applied either in alcoholic or aqueous solution, after neutralization with calcium carbonate. The strength employed varied from 1 : 1000 to 1 : 200. It is painted on the patches twice daily, and a cloth may be wetted with it and applied to suitable parts. Albumin may be occasionally found in the urine of patients so treated. Its advantages over chrysarobin and pyrogallie acid are cheapness, absence of staining, and the comparative infrequency of any irritating effect.

THE REMOVAL OF TATTOO MARKS.

In his letter to the *Journal of Cutaneous and Genito-urinary Diseases*, March, 1889, Brocq refers to the plan of treatment practised by Variot for the removal of tattoo marks. The method consists in freely painting the part with a strong tannin solution and then immediately pricking the skin with a bunch of needles in order that the tannin may penetrate deeply. The operated surface is then rubbed vigorously with nitrate of silver. The pricked points in the course of a few moments become black, and the surface is then wiped off. Varying degrees of inflammation ensue, with more or less pain on motion. In about two weeks the eschar becomes spontaneously detached, beneath which is seen a red cicatrix. In due time the redness disappears.

The statement of Dupuy that the natives of the Indian Archipelago remove tattoo marks, without leaving a scar, by making tattooings with the juice of the carica papaya, is also quoted.

OBSTETRICS.

UNDER THE CHARGE OF

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DIAGNOSTIC POINTS OF VALUE IN THE FIRST THREE MONTHS OF PREGNANCY.

LÖHLEIN (*Deutsche med. Wochenschrift*, No. 25, 1889) regards Hegar's sign, softening of the lower uterine segment, as a most valuable sign of early pregnancy. He has found the elastic, cystic feeling given by the body of the

uterus equally significant, often suggesting a bicornate uterus. This condition is present from the second half of the second month to the end of the third; it is best appreciated by bimanual examination, often *per rectum*.

Auscultation of the fetal movements is also a valuable sign, applicable three or four weeks before life is felt. In a case of small ovarian cyst with disordered menstruation and bluish vagina, he was deceived by contractions of the recti and oblique muscles.

PRACTICAL POINTS FROM SECTIONS MADE UPON WOMEN DYING
IN LABOR.

BARBOUR (*Edinburgh Medical Journal*, July, 1889), from the study of frozen sections, finds that the mechanism of labor does not properly begin until the head enters the pelvic cavity. The bony pelvis is encroached upon by soft parts in the living patient at the brim, one-fifth of an inch in the conjugate; transversely, one inch; obliquely, one-quarter inch. In the pelvic cavity the conjugate is lessened two-fifths of an inch; transverse diameter, one inch; obliques, three quarters of an inch plus a reducible one-half inch. The fetal head measured—suboccipito-bregmatic diameter, four and one-quarter inches; occipito-frontal, four and one-half inches; occipito-mental, five inches: this was the unmoulded head before labor. Regarding the mechanism of labor, the fetus grows in a condition of flexion which becomes less well marked as labor proceeds.

LABOR COMPLICATED BY THE ADMINISTRATION OF ONE-FIFTH OF A GRAIN
OF STRYCHNIA.

AVRARD (*Bulletin de la Société Obstétricale de Paris*, No. 6, 1889) reports the case of a primipara to whom a midwife had given strychnia aggregating one-fifth of a grain to secure vigorous pains. This result not following, a physician was called. The fetus was found to be in cephalic presentation; dilatation of the os and cervix was complete. Traction with the forceps failing, the uterus was found tetanized and very hard. A hot bath was given, belladonna ointment was applied to the os, and under chloroform the head was brought to the pelvic floor by forceps and delivered. As the cord was about the neck, the attempt to deliver the shoulders rapidly was made, but failed. Rotation was very difficult from the uterine rigidity; the child was stillborn; the mother recovered without complications. None of the usual constitutional effects of the drug were observed; pains in the legs and convulsive movements were present. The patient's subsequent labor was marked by uterine inertia requiring forceps.

A SINGULAR ERROR IN DIAGNOSTICATING A BREECH PRESENTATION.

LOVIOT (*Ibid.*) describes a case of breech presentation in a primipara forty years old, in which the os uteri, but slightly dilated, was thought to be the child's anus, as it was smeared with meconium. Dilatation was thought complete when it had scarcely begun. The child was stillborn, after a tedious labor, during which the error became apparent to the obstetricians in attendance.